



**Post Graduate Program in Entrepreneurship  
Application Form**

**7) Academic Performance**

Class	Specialization /Stream	Month & Year of Passing	% Marks/ Grade	Name of the Institute	Univ./ Board
S.S.C					
H.S.C					
Degree					
Post Graduation					
Any Other Qualification					

**8) Family Details**

	Name	Qualification	Occupation & Name of organisation
Father			
Mother			
Siblings			
Spouse			

**9) How did you hear about the Post Graduate Program in Entrepreneurship?**

- Print, mention publication \_\_\_\_\_
- Online, mention website \_\_\_\_\_
- Recommended by a friend / colleague / relative

**10) Facebook id:** \_\_\_\_\_ **11) Twitter handle:** \_\_\_\_\_

**12) LinkedIn id:** \_\_\_\_\_



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**13) Organisation Details**

***(Attach the Annual Report, Product Brochures and other related details to highlight nature of business)***

Name of the Organisation: \_\_\_\_\_

Ownership: \_\_\_\_\_ Industry: \_\_\_\_\_  
(Sole Proprietor / Partnership / Pvt. / Public Limited)

Products: \_\_\_\_\_

Who is the promoter? \_\_\_\_\_

Applicant's relationship with promoter: \_\_\_\_\_

Family's participation in ownership: \_\_\_\_\_

Family's participation in management: \_\_\_\_\_

Website of the Organisation: \_\_\_\_\_

**14) Performance (Last 2 years Profit & Loss A/C and Balance Sheet)**

	Year :	Year :
Sales		
Profit After Tax		
Fixed Assets / Gross Block		
Total Employees		
Managerial		
Staff		
Workers		



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**Part B**

**(Attach additional sheets wherever needed to provide detailed information)**

1) Academic Achievements (Professional Awards/Medals/Prizes/Scholarships)

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2) Extra Curricular, Hobbies and Interests (Interests, Accomplishments etc.)

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3) State 3 of your strengths and weaknesses.

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4) Who are your business role models and why?

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5) What is your vision for your business in 2 years and 5 years from now? What are the long term & short term growth plans of your organization?

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6) Describe your role and responsibility in your organization?

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7) What are the areas of immediate concern for your organization?

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8) How do you think Welingkar can add value to your existing business?

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9) Give a brief description of the role you are expected to perform in your organization after the course.

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**References:**

(1)

Name: \_\_\_\_\_

Organization &  
Designation: \_\_\_\_\_

\_\_\_\_\_

Known to the applicant in what capacity:  
Personal  Professional

Contact No: \_\_\_\_\_

(2)

Name: \_\_\_\_\_

Organization &  
Designation: \_\_\_\_\_

\_\_\_\_\_

Known to the applicant in what capacity:  
Personal  Professional

Contact No: \_\_\_\_\_

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**Checklist for Attachments**

(Please attach the following with your completed application form and deliver it to the address mentioned below)

1.	<b>Cash / Cheque / Demand Draft of Rs.1500/-</b> in favor of Welingkar Institute of Management Development and Research, payable in Mumbai.	<input type="checkbox"/>
2.	A copy of your Degree certificate & Degree mark list (University)	<input type="checkbox"/>
3.	A copy of Birth Certificate or in its absence SSC mark-sheet (Highlight your date of birth)	<input type="checkbox"/>
4.	Company Registration Certificate	<input type="checkbox"/>
5.	Balance sheet and Profit and Loss Account of last two years of your organisation (Highlight the sales figures)	<input type="checkbox"/>
6.	Some kind of company literature or a write-up on your business	<input type="checkbox"/>

**Cheque / DD No:** \_\_\_\_\_ **Receipt No :** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For Office Use:** (Details of person accepting the application form)

Coordinator Name: \_\_\_\_\_

Coordinator Signature: \_\_\_\_\_

**For Accounts Dept:**

Form fees accepted by: \_\_\_\_\_ Signature: \_\_\_\_\_

Date :